

RECEIVED

DEC 23 '05

**STATE OF SOUTH DAKOTA**  
**Statement of Legal Newspaper Ownership and Circulation** S.D. SEC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

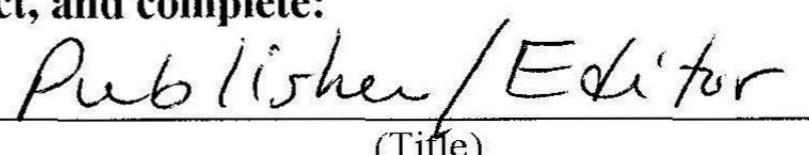
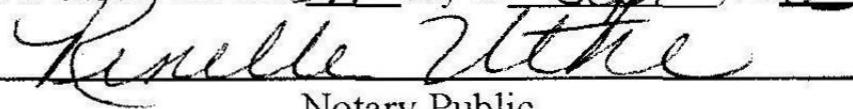
1. TITLE OF NEWSPAPER <b>Lyman County Herald</b>		2. DATE <b>9-29-05</b>
3. FREQUENCY OF ISSUE <b>weekly</b>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <b>52</b>	3B. ANNUAL SUBSCRIPTION PRICE \$ <b>25.00</b>
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <b>PO Box 518, Presho, SD 57568</b>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <b>PO Box 518 Presho, SD 57568</b>		
6. FULL NAME OF PUBLISHER:		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.) FULL NAME <b>Lyman County Herald, LLC</b> COMPLETE MAILING ADDRESS <b>PO Box 518, Presho, SD 57568</b>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) <b>Dakota Praire Bank</b>		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	1200	1200
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	105	99
2. Mail Subscription (Paid and or requested)	965	975
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	1070	1074
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	8	8
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1078	1082
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	122	118
2. Return from News Agents		
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	1200	1200

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

  
 (Signature)

 State of South Dakota )  
 County of Lyman )  
 (Seal)

  
 (Title)
Sworn to before me this 29 day of Sept, 2005
  
 Notary Public

 My commission expires: NOTARY PUBLIC - SOUTH DAKOTA  
 My Commission Expires  
 September 20, 2006